

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         | JW       | 7535   | 07-25-00 |
| O.I.P.E. CLASSIFIER       |          | 8      | 7-28-00  |
| FORMALITY REVIEW          |          |        |          |
| RESPONSE FORMALITY REVIEW |          | 59158  | 9-1-00   |

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral) ... Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

| Claim          | Date    |
|----------------|---------|
| Final Original | 7/27/00 |
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| Claim          | Date |
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| Claim          | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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